


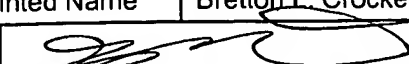
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

171

 <h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="font-size: small; margin: 0;">(to be used for all correspondence after initial filing)</p>	Application Number	10/512,113	
	Filing Date	October 21, 2004	
	First Named Inventor	Sunil Adhukar Bhangale	
	Group Art Unit	1795	
	Examiner Name	Chacko Davis, Daborah	
Total Number of Pages in This Submission (including this sheet)	29	Attorney Docket No.	3110.ARTH.PT

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Appeal Communication: <input type="checkbox"/> Appeal Notice <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Reply Brief <input type="checkbox"/> Assignment with Cover Sheet <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Check in the amount of \$ <u>1,110</u> <input type="checkbox"/> Credit card authorization in the amount of \$____ <input type="checkbox"/> Declaration & Power of Attorney <input type="checkbox"/> Drawings ____ sheets <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input checked="" type="checkbox"/> Extension of Time Request <u>3</u> month <input type="checkbox"/> Fee Calculation Table <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form 1449 <input type="checkbox"/> Copies of IDS References <input type="checkbox"/> Issue Fee Transmittal	<input type="checkbox"/> Maintenance Fee Transmittal ____ year <input type="checkbox"/> Missing Parts Response <input type="checkbox"/> Notification of Change of Attorney Address & Docket Number <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Revocation & Power of Attorney <input type="checkbox"/> Status Inquiry <input type="checkbox"/> Other:
<div style="border: 1px solid black; padding: 5px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Attorney for Applicant	Bretton L. Crockett, Registration No. 44,632 MORRISS O'BRYANT COMPAGNI, P.C. 734 East 200 South Salt Lake City, Utah 84102 (801) 478-0071 telephone; (801) 478-0076 facsimile		
Signature		Date	December 16, 2006

CERTIFICATE OF MAILING UNDER 37 CFR § 1.8			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, on the date indicated below, in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			
Typed or Printed Name	Bretton L. Crockett		
Signature		Date	December 16, 2008